

MEMORANDUM

Agenda Item No. 3(A)(12)

TO: Honorable Chairman Jean Monestime
and Members, Board of County Commissioners

DATE: December 15, 2015

FROM: Abigail Price-Williams
County Attorney

SUBJECT: Resolution retroactively
authorizing in-kind for the
October 10, 2015 "City of
Opa-Locka Hispanic Heritage
Celebration"

The accompanying resolution was prepared and placed on the agenda at the request of Prime Sponsor Chairman Jean Monestime.



Abigail Price-Williams
County Attorney



APW/smm



MEMORANDUM

(Revised)

TO: Honorable Chairman Jean Monestime
and Members, Board of County Commissioners

DATE: December 15, 2015

FROM: Abigail Price-Williams
County Attorney

SUBJECT: Agenda Item No.3(A)(12)

Please note any items checked.

- ☐ "3-Day Rule" for committees applicable if raised
- ☐ 6 weeks required between first reading and public hearing
- ☐ 4 weeks notification to municipal officials required prior to public hearing
- ☐ Decreases revenues or increases expenditures without balancing budget
- ☐ Budget required
- ☐ Statement of fiscal impact required
- ☐ Statement of social equity required
- ☐ Ordinance creating a new board requires detailed County Mayor's report for public hearing
- ☒ No committee review
- ☐ Applicable legislation requires more than a majority vote (i.e., 2/3's ____, 3/5's ____, unanimous ____) to approve
- ☒ Current information regarding funding source, index code and available balance, and available capacity (if debt is contemplated) required

Approved _____ Mayor
Veto _____
Override _____

Agenda Item No. 3(A)(12)
12-15-15

RESOLUTION NO. _____

RESOLUTION RETROACTIVELY AUTHORIZING IN-KIND SERVICES FROM THE PARKS, RECREATION AND OPEN SPACES DEPARTMENT FOR THE OCTOBER 10, 2015 "CITY OF OPA-LOCKA HISPANIC HERITAGE CELEBRATION" SPONSORED BY THE CITY OF OPA-LOCKA IN AN AMOUNT NOT TO EXCEED \$910.00 TO BE FUNDED FROM THE BALANCE OF THE DISTRICT 2 FY 2015-16 IN-KIND RESERVE FUND

WHEREAS, the City of Opa-Locka has requested in-kind services from the Parks, Recreation and Open Spaces Department for the October 10, 2015 "City of Opa-Locka Hispanic Heritage Celebration" in an amount not to exceed \$910.00; and

WHEREAS, the "City of Opa-Locka Hispanic Heritage Celebration" brings together residents of the City of Opa-Locka and surrounding communities while providing family-friendly entertainment; and

WHEREAS, the "City of Opa-Locka Hispanic Heritage Celebration" will celebrate, among other things, Hispanic Heritage Month and Hispanic culture; and

WHEREAS, the "City of Opa-Locka Hispanic Heritage Celebration" is a special event, as that term is defined in the attached Fee Waiver/In-kind Service Application, and \$910.00 of the in-kind services shall be funded from the balance of the District 2 FY 2015-16 In-Kind Reserve funds,

NOW, THEREFORE, BE IT RESOLVED BY THE BOARD OF COUNTY COMMISSIONERS OF MIAMI-DADE COUNTY, FLORIDA, that this Board retroactively authorizes in-kind services from the Parks, Recreation and Open Spaces Department for the October 10, 2015 "City of Opa-Locka Hispanic Heritage Celebration" sponsored by the City of Opa-Locka, in an amount not to exceed \$910.00 to be funded from the balance of the District 2 FY 2015-16 In-Kind Reserve Fund.

The Prime Sponsor of the foregoing resolution is Chairman Jean Monestime. It was offered by Commissioner _____, who moved its adoption. The motion was seconded by Commissioner _____ and upon being put to a vote, the vote was as follows:

Jean Monestime, Chairman	
Esteban L. Bovo, Jr., Vice Chairman	
Bruno A. Barreiro	Daniella Levine Cava
Jose "Pepe" Diaz	Audrey M. Edmonson
Sally A. Heyman	Barbara J. Jordan
Dennis C. Moss	Rebeca Sosa
Sen. Javier D. Souto	Xavier L. Suarez
Juan C. Zapata	

The Chairperson thereupon declared the resolution duly passed and adopted this 15th day of December, 2015. This resolution shall become effective upon the earlier of (1) 10 days after the date of its adoption unless vetoed by the County Mayor, and if vetoed, shall become effective only upon an override by this Board, or (2) approval by the County Mayor of this Resolution and the filing of this approval with the Clerk of the Board.

MIAMI-DADE COUNTY, FLORIDA
BY ITS BOARD OF
COUNTY COMMISSIONERS

HARVEY RUVIN, CLERK

By: _____
Deputy Clerk

Approved by County Attorney as
to form and legal sufficiency.

GKS

Gerald K. Sanchez

MIAMI-DADE COUNTY
FEE WAIVER/IN-KIND SERVICES APPLICATION

COUNTY FEE WAIVERS OR IN-KIND SERVICES REQUESTED THROUGH THIS PROCESS ARE NOT EFFECTIVE UNTIL APPROVED BY ACTION OF THE BOARD OF COUNTY COMMISSIONERS PURSUANT TO THE MIAMI-DADE COUNTY HOME RULE CHARTER

Please complete the following form and submit completed form along with requested materials, if applicable, to:

Office of Management and Budget
111 N.W. 1st Street, Suite 2200
Miami, FL 33128
Phone: (305) 375-5143
Fax: (305) 375-5168

Type of Event/Application (select one of the following):

- ☐ District Event - Event of minimal impact related to specific commission district (Complete questions 1-7, sign and date; copy will be submitted to the appropriate District Commissioner within two days of receipt of application.)
- ☐ Small Event - Event of minimal impact not necessarily related to a specific commission district. (Complete questions 1-7, sign and date.)
- ☒ Special Event* - Event with expected attendance of less than 5,000 with localized impact limited to an individual community or municipality (Complete questions 1-12, sign, date and submit form no later than 60 days prior to event date.)
- ☐ Major Event* - Large Event with expected attendance of over 5,000 or significant probability of protests, controversy, violence or vandalism (Complete questions 1-12, sign, date and submit form no later than 120 days prior to event date.)

Note: Event budget must be included for "Special" and "Major" event types.

Commissioner sponsoring event Commissioner Jean Monestime

1. Full legal name of the requesting organization: City of Opa-locka / Commissioner Luis Santiago

2. Applicant Status: (Select one of the choices below)

- ☐ Not-For-Profit or Tax Exempt
- ☐ For-Profit
- ☒ Local Government or Public Entity
- ☐ Other (specify): _____

3. Name and contact information for single point of contact (address, phone, fax, e-mail address, etc.): _____

Shamecca Lawson, Assistant City Clerk
480 Fisherman Street, 4th floor, Opa-locka, FL 33054
305.953.2801 / slawson@opalocka.fl.gov

4. Specify fee waiver or in-kind service requested (quantify, if applicable): Stage / Showmobile

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FEE WAIVER/IN-KIND SERVICES APPLICATION
Page 2

5. Name, date of event, description, and purpose of the event (if event is a fund-raiser, define the beneficiaries): _____

Hispanic Heritage Celebration

October 10, 2015 at 12:00 noon

Community wide, family oriented event

6. Please select ALL that apply to event:

- ☐ Economic Development: Event supports vitality or growth of the local economy
- ☐ Youth/Education: Event benefits youth of any age and/or offers educational benefits
- ☐ Health and Social Services: Event supports health-related causes and/or social programs or institutions that improve quality of life within the community
- ☒ Arts and Culture: Event supports music, theatre, literature, art or culture
- ☐ Environmental: Event benefits environmental concerns or promotes conservation
- ☐ Sports and Athletics: Event supports/promotes organized sports or recreational participation

7. Physical address of event venues (please specify Commission District(s)): _____

Sherbandy Park

215 Perviz Avenue, Opa-locka, FL 33054

8. Description of regional or local impact: N/A

9. Dally/hourly event schedule, including set-up and breakdown schedule (attach event calendar, if applicable): _____

9:00 a.m. - 7:00 p.m.

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FEE WAIVER/IN-KIND SERVICES APPLICATION
Page 3

10. Detailed description of event venues (map or schematic of event venues, access points, surrounding roadways and traffic flow diagrams, if applicable): NW 27 Avenue to Sharazad Boulevard
Turn on Perviz Avenue
11. Expected number of participants and estimated attendance (per day, if applicable): 500 people
12. Itemized budget, including total event budget, total budget of host organization, if applicable, and total commitment of resources (attach additional pages as needed): \$,000

I hereby certify that all the statements made in this application are true and correct.

Shirinees Lawton
Signature of Authorized Representative

10/27/2015
Date



**SHOWMOBILES, STAGES, BLEACHERS,
AND SOUND PRODUCTION**
(305) 226-8315 Ext. 224/(305) 553-8511 (Fax)

EQUIPMENT (S) CONFIRMATION FORM

ORGANIZATION/AGENCY: City of Opa Locka

EQUIPMENT REQUESTED: Small Showmobile

NAME OF PERSON RESPONSIBLE FOR THIS BILL: Office of Chairman Monestime

OR INDEX CODE (MIAMI-DADE AGENCIES ONLY): _____

BILLING ADDRESS/ZIP CODE: 900 NE 125 Street Miami, Florida 33161

NAME/TITLE OF THE EVENT: City of Opalocka's Hispanic Heritage Celebration

ADDRESS OF EVENT: Sherbondy Village 215 Perviz Avenue

TODAY'S DATE: 10/01/15 DATE (S) & TIME OF EVENT: October 10, 2015 @ 12n

SET-UP TIME & DAY: October 10, 2015 @ 9am

TAKE-DOWN & DAY: October 10, 2015 @ 6pm

CONTACT PERSON/PHONE: Melonie Burke 305-505-1295/Sha mecca Lawson 305-401-5807

AT SITE CONTACT/CELL PHONE#: Sha mecca Lawson 305.401.5807

SPECIAL INSTRUCTIONS: Direction item(s) are to be placed, maps, diagrams, etc.

OTHER INFORMATION: Include additional equipment if needed.

We, the users, understand that we assume full responsibility for any damage, theft, or loss to said equipment and its accessories between the time the Miami-Dade Park and Recreation Department completes setting up and the time it takes down. We, the users, also agree to adhere to the requests set forth in the rental policy. We do have a copy of the rental policy and fully understand the requirements set forth in renting the equipment requested as out-lined in the rental policy. We also understand that the total fee is to be remitted (15) fifteen working days before the event.

*Fee: \$910.00 In-kind Office of the
Chair

Signature: _____

*(SEE FEE SCHEDULE FOR EXACT CHARGES)

Chairman Jeff Monestime
Agency/Group: Office of the Chair, District 2

**CANCELLATIONS MUST BE MADE 72 HOURS IN ADVANCE OF THE
EVENT BY FAX OR EMAIL OTHERWISE EXPECT TO BE CHARGED**

**½ (HALF) OF RENTAL FEE. *There will be no completed reservation on the schedule unless the
confirmation Form is filled out completely and signed.**

Late equipment arrivals, please call (786) 236-7926

HISPANIC HERITAGE FESTIVAL

INCOME	AMOUNT	CHECK #	EXPLANATION
EXPENSES			
Landstory	\$ 2,800.00	bands	Hold over from Comm Santiato 2015 account
Landstory	\$ 1,300.00	entertainment	Hold over from Comm Santiato 2015 account
Landstory	\$ 2,500.00	food vendors	
Party Entu Casa	\$ 1,900.00	bounce house, train, face painting	
Event Outfitters	\$ 1,215.00	tables, chair, tents	
Misc purchases	\$ 600.00	gift cards, napkins, plates, forks	
Brisco	\$ 1,250.00	entertainment	
USA FLAGS	\$ 255.00		
TOTAL EXPENSES	\$ 4,400.00		

AS OF 10-7-15



OPA-LOCKA

The Mayor & Commissioners of the Great City of Opa-Locka are honored to invite our community to celebrate



Hosted by:
Commissioner
Luis B. Santiago



Hosted by:
Commissioner
Joseph L. Kelley

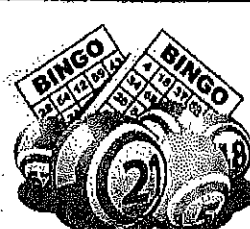


Enjoy an afternoon full of
CULTURAL FOLKLORE



MUSIC • FOOD • GAMES
AND MUCH MORE!!!

SATURDAY OCTOBER 10, 2015
THE CELEBRATION STARTS AT 12:00 NOON
SHERBONDY VILLAGE
215 President Barack Obama Ave.



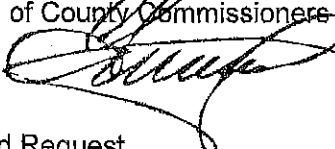
PRIZE FOR BEST TRADITIONAL COSTUME
FOR MORE INFORMATION,
PLEASE CALL 305.953.2800 / 2801

Memorandum



Date: December 15, 2015

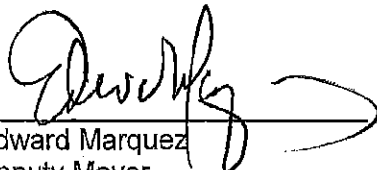
To: Honorable Chairman Jean Monestime
and Members, Board of County Commissioners

From: Carlos A. Gimenez
Mayor 

Subject: District Specific In-Kind Request

A retroactive waiver for in-kind services has been requested by the City of Opa-Locka for its "Hispanic Heritage Celebration" event, which was held on October 10, 2015.

In-kind services have been requested from the Parks, Recreation and Open Spaces Department in the amount of \$910.00 for the use of a small showmobile. This event will be funded from the balance of District 2 FY 2015-16 In-Kind Reserve Funds.


Edward Marquez
Deputy Mayor

Inkind01559